



Microsoft Academic Select **Enrollment**

Academic Select Agreement
number
*Reseller or Microsoft affiliate to
complete*

Academic Select Agreement
Expiration Date
*Reseller or Microsoft affiliate to
complete*

Enrollment number
Microsoft affiliate to complete

Previous enrollment number
Reseller to complete

Previous enrollment end date
Reseller to complete

This Microsoft Academic Select Enrollment is entered into between the following entities. Each party will notify the other in writing if any of the information in the following table changes.

Customer		
Name of Entity		Contact Name (This person handles access to online information and receives notices unless a different contact is provided in the section below.)
Street Address		Contact Email Address (required for online access)
City	State/Province	Phone
Country	Postal Code	Fax
Microsoft Account Manager Name		Microsoft Account Manager Email Address
Contracting Microsoft Affiliate		
Microsoft Licensing, GP - 6100 Neil Road, Suite 210 - Reno, Nevada USA 89511-1137 - Dept. 551, Volume Licensing		
If online access and notices should be provided to someone or some place other than above, complete this section:		
Name of Entity		Contact Name
Street Address		Contact Email Address (required for online access)
City	State/Province	Phone
Country	Postal Code	Fax

If duplicate electronic contractual notices should be provided to someone or some place in addition to the above, complete this section:

Name of Entity		Contact Name
Street Address		Contact Email Address (required for electronic notices)
City	State/Province	Phone
Country	Postal Code	Fax

Definitions. When used in this enrollment, “you” refers to the entity that signs this enrollment with us and “we” or “us” refers to the Microsoft entity that signs this enrollment. All other definitions in the Microsoft Academic Select Agreement identified above apply here.

Effective date. If you are renewing Software Assurance coverage (or similar upgrade protection) from one or more previous Microsoft agreements, then the effective date of this enrollment will be the day after the earliest expiration of such coverage. Otherwise the effective date will be the date this enrollment is signed by us. Where a previous Microsoft agreement is being used, your reseller will require the agreement number and agreement end date to complete the applicable boxes above.

Term. This enrollment will expire on the date on which the Microsoft Academic Select Agreement expires, unless it is terminated earlier as provided for in that Agreement.

Representations and warranties. By signing this enrollment, the parties agree to be bound by the terms of this enrollment, and you represent and warrant that: (i) you have read and understood the Microsoft Academic Select Agreement, including any amendments, and the product use rights, and agree to be bound by those; (ii) you are an eligible education customer and are either the entity that signed the Microsoft Academic Select Agreement or its affiliate; (iii) during the initial term of this enrollment you expect to purchase licenses equal to at least 750 points; and (iv) the information that you provide on each of the attached forms is accurate.

Non-exclusivity. This enrollment is non-exclusive. Nothing contained in it requires you to license, use or promote Microsoft software or services exclusively. You may, if you choose, enter into agreements with other parties to license, use or promote non-Microsoft software or services.

Microsoft Volume Licensing Web Sites

(Note: We will advise you of any changes to these URLs.)

Product Use Rights	http://microsoft.com/licensing/resources/
Product List	http://microsoft.com/licensing/resources/
Microsoft Volume Licensing Services (MVLS) (password-protected site to view orders under this enrollment)	https://licensing.microsoft.com/
Customer Guide	http://www.microsoft.com/education/?ID=Select

<i>Notices to Microsoft should be sent to:</i>	<i>Copies should be sent to:</i>
Microsoft Licensing, GP 6100 Neil Road, Suite 210 Reno, Nevada USA 89511-1137 Dept. 551, Volume Licensing	Microsoft Law and Corporate Affairs One Microsoft Way Redmond, WA 98052 USA Volume Licensing Group (425) 936-7329 fax

This enrollment consists of (1) this cover page, (2) the Software Assurance Election form, and (3) the Reseller Information Form.

<i>Customer</i>	<i>Contracting Microsoft Affiliate</i>
Name of Entity	Microsoft Licensing, GP
Signature	Signature
Printed Name	Printed Name
Printed Title	Printed Title
Signature Date	Signature Date (date Microsoft affiliate countersigns)
	Effective Date (may be different than our signature date)

Software Assurance Election Form

1. Software Assurance Membership election:

To become a Software Assurance Member, you must agree to purchase and maintain Software Assurance for all copies of all products licensed under this enrollment from at least one product pool. For a description of benefits resulting from choosing one or more product pools below and additional details regarding the Software Assurance Membership program, please consult your reseller or Microsoft account manager.

For each product pool, mark "yes" or "no" to indicate whether you are committing to purchase and maintain Software Assurance for all copies of all products licensed from that pool under this enrollment.

Product Pools	Yes	No
Applications	<input type="checkbox"/>	<input type="checkbox"/>
Systems	<input type="checkbox"/>	<input type="checkbox"/>
Servers	<input type="checkbox"/>	<input type="checkbox"/>

Note: If you mark "Yes", we will not accept orders for licenses without Software Assurance

2. Election to renew Software Assurance (or similar upgrade protection):

If you are renewing Software Assurance (or similar upgrade protection) from a previous Microsoft agreement, mark the box below and provide your previous enrollment number and enrollment end date or Microsoft Open License authorization number and end date to your reseller for it to complete the applicable boxes at the top of the cover page of this enrollment.

For an explanation of the circumstances under which you may renew, see subsection 3(a) (Placing orders) of the Academic Select Agreement.

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Yes, I am renewing Software Assurance.

Reseller Information Form

Use this form to identify your selected reseller and have your reseller complete the information below and acknowledge your selection by signing below.

<i>Reseller Information:</i>
Reseller Company Name
Street Address
City and State/Province and Postal Code
Country
Contact Name
Phone
Fax
Email Address

The undersigned confirms that the Reseller information is correct.

Name of Reseller
Signature
Printed Name
Printed Title
Date

Appendix

Media Shipping Information Form - Starter CD Kit

Enrollment Information		Reseller Contact	
Agreement #: (Reseller or Microsoft affiliate to complete)		Company Name:	
Enrollment # (Microsoft affiliate to complete)		Contact Name:	
Customer Contact Name:		Contact Email:	
		Contact Phone:	

At your option, Starter CD kits and CD-ROM subscriptions relating to your Academic Select Enrollment (identified above) will be shipped to the address set out below. Terms used but not defined in this form have the meanings given to them in your enrollment.

CD Kit Ship To Information (* indicates required information)	
Company Name *	Contact Name *
Street Address *	Contact Email Address *
City and State / Province *	Contact Phone Number *
Country and Postal Code	Contact Fax Number

If you choose below to receive media, then upon our acceptance of your enrollment, we will send you your starter CD kit (media) in the language(s) you select. This starter CD kit will be provided at no additional charge, in order to permit you to exercise the license rights granted under your enrollment and the related Academic Select License Agreement. You may also subscribe to updates in the form of CDs, or upon reasonable notice, electronic download or similar other means. If you need additional CD kits and updates, you may order these through your reseller for a fee. For a complete list of the contents of any kit, visit the web site at <http://selectug.mslicense.com/>.

- ☐ I **want** to receive a starter CD kit (media)
 ☐ I **want** to subscribe to receive kit updates
- ☐ I **do not want** to receive a starter CD kit (media)
 ☐ I **do not want** to subscribe to receive kit updates

The charges for any purchased media may be subject to sales taxes based upon where media delivery occurs. If you are exempt from sales taxes in the media delivery location, please provide the applicable sales tax exemption documentation with your enrollment.

Media Shipping Information Form – Starter CD Kit (Continued)

<i>For each language and group you wish to receive, mark the corresponding box with an X</i>								
Language	Applications Pool					Systems Pool	Servers Pool	
	Office Family	Mapping*	Developer Tools	Training and Learning	Products for Macintosh	Windows Client: Business	Windows Servers	Server Applications
English	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
English/MultiLanguage	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Arabic	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>
Brazilian Portuguese	<input type="checkbox"/>			<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chinese Simplified	<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chinese Traditional	<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Chinese Traditional Hong Kong/Pan-Chinese						<input type="checkbox"/>	<input type="checkbox"/>	
Czech	<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Danish	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>
Dutch	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Finnish	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>
French	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
German	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Greek	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>
Hebrew	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>
Hungarian	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Italian	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Japanese	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Korean	<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Norwegian	<input type="checkbox"/>					<input type="checkbox"/>		<input type="checkbox"/>
Pan Chinese	<input type="checkbox"/>							<input type="checkbox"/>
Polish	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Portuguese	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Russian	<input type="checkbox"/>		<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Spanish	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Swedish	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Thai	<input type="checkbox"/>							
Turkish	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

* Mapping Kit is not available for use in or shipment to, India, Morocco, Pakistan, China, Hong Kong SAR, Macau SAR, and Turkey

☐ = Not Available